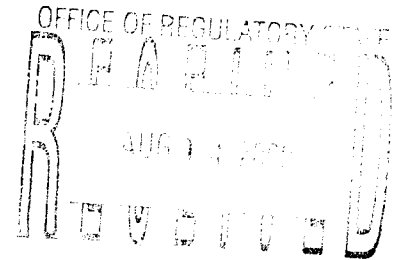




C. Earl Hunter, Commissioner

Promoting and protecting the health of the public and the environment.

May 5, 2009



David Harris  
Waterhead LLC, DBA Rock at Jocassee  
6212 Hwy 11  
Pickens SC 29671

Re: Gauley Falls W/S  
Potable Water System Sanitary Survey  
Pickens County, System # 3950004

Dear Mr. Harris:

On April 23, 2009 the Greenville EQC District Office conducted a sanitary survey of Gauley Falls W/S (Rock at Jocassee) public water system. The intent of a sanitary survey is to evaluate a system's ability to produce and distribute a safe drinking water supply. Your cooperation during this inspection was greatly appreciated.

The enclosed sanitary survey report represents an official notification of the results of our evaluation. Persons responsible for operation and maintenance of the ground water system should promptly review this report. It consists of system characteristics and statistical information (page 1); ground water source information (page 2); and a comprehensive rating page which addresses different aspects of system operation, maintenance, and record keeping. Ratings fall under the following three categories: Satisfactory (S), Insufficient/Needs Improvement (I) or Unsatisfactory (U) – (page 3). Departmental comments and/or recommendations for appropriate corrective actions for all items marked I or U on page 3 of the report have been discussed below:

#### GENERAL INFORMATION

Waterhead LLC, DBA Rock at Jocassee (Gauley Falls W/S) is classified as a "Community Water System" or C system. Drinking water is provided by:

**SOURCE:** Well One – Source ID G39105 is a 6" drilled well 168 ft deep with a 10 hp submersible pump located on Hwy 178. The well produces approximately 24 gpm.

**DISTRIBUTION:** The water system provides water for a population of approximately 36 with fourteen (14) residential connections and four (4) non-residential connections.

**STORAGE:** Total storage of 9,500. One 500-gallon tank located at the well and One 9,000 tank located at the end of Fulda Court. An air compressor is provided at the large tank.

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL  
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**SCDHEC****Public Water System Inventory Report Form**

#4/23 2:00

**Bureau of Water**

Site Name: GAULEY FALLS W/S

System Number: 3950004

Fax Number: (864)878-0201

(A)dd, (M)odify, (R)enum, (D)elete: **M**Reason: *Sanitary Survey*Today's Date: *4/23/09***DW Mailing Address:**

Owner: WATERHEAD LLC DBA

Attn: STAN BROWN

WATERHEAD LLC DBA

171 SLIDING ROCK RD

PICKENS, SC 29671

Owner Business Telephone: (864)270-1431

Owner Emergency Telephone: (864)878-8172

**Site Info Address:**

6212 HWY 11

PICKENS, SC 29671

\* Relation Contact: HARRIS, DAVID

\*Phone: (864)878-8087

DW Mail Attention: DAVID HARRIS

DW Contact Telephone: (864)878-8087

**System Characteristics**

System Type.... C	Inact Code.....	Service Area.... R1	Season On (mo/day)..... 01/01
Subtype.....	Inact Date (mo/yr)....	Counties Served:	Season Off (mo/day).... 12/31
Owner Type..... PRIV	Begin Date (mo/yr)... 10/1988	39	

**Statistical Information****Source Use Information:**

Percent Surface Water.....	0
Percent Ground Water.....	100
Percent Purchased Surface Water...	0
Percent Purchased Ground Water...	0

Total must equal 100%

Number of Surface Water Sources...	0
Number of Ground Water Sources...	1
Purchased Surface Water Sources...	0
Number of Permanent SW Sources...	0
Number of Emergency SW Sources...	0
Number of Permanent GW Sources...	1
Number of Emergency GW Sources...	0

**Service Population:**

Population.....	36
Secondary Population.....	0

**Number of Service Connections:**

Residential.....	14	Total ... 18
Non Residential.....	4	
Maximum Allowable.....	49	
Permitted.....	17	

**Production (MGD):**

Average.....	0.0425 .0055
Maximum Day.....	.009

**Capacity:**

Total.....	.02304
Emergency.....	0.0000

**Storage:**

Elevated (MG).....	0.000
Ground (MG).....	0.000
Pressure (TG).....	9.500

**Comments**WATERHEAD LLC DBA GAULEY FALLS W/S  
Address and phone info here.Signature: *[Signature]*

April 16, 2009

Page 1 of 1

dwinvent.rdf

**SCDHEC****Bureau of Water****Public Water System Sanitary Survey Report  
Ground Water Systems**

Site name: GAULEY FALLS W/S

System number: 3950004

Last Survey: 03/25/2008

Survey Date: 4.23.09**Comments**

Check valve?

Clean out buses surrounding tank.

Follow-up on check valve in 6 months.

  
DHEC Representative  
System Representative

Title

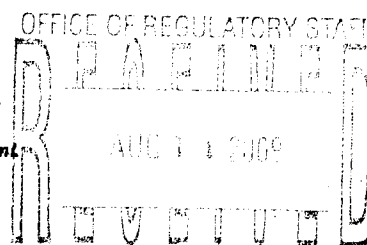
## Diagram Key for Jet Pump and Submersible Pump Systems

Diagrams 1 and 2.

1. **Well Casing:** the top of the well casing shall extend at least twelve (12) inches above the concrete pad or pump house floor.
2. **Concrete Pad:** a minimum radius of three (3) feet from the center of the well casing and a minimum thickness of four (4) inches.
3. **Well Identification Plate:** must be permanently installed immediately after completion of drilling.
4. **Grout:** well must be grouted in accordance with the construction specifications of this permit.
5. **Screened Vent:** must face downward with the opening located a minimum of eighteen (18) inches above the concrete pad or well house floor. Screen must have an effective opening of .024 inches or smaller. *This item is not required on packer type jet pumps.*
6. **Air / Vacuum Valve (optional):** design of the system may require this valve. This item is not needed on a jet pump system.
7. **Check Valve**
8. **Pressure Gauge**
9. **Flow Meter:** must be located down stream of the check valve and before the blow-off. This item is required on any public water supply well where the yield of the well cannot be easily measure from the blow-off using a bucket and stopwatch or by other means acceptable to the Department. The flow meter must be capable of measuring both instantaneous and totalized flow.
10. **Pressure Relief Valve (optional):** may be installed anywhere along the well head piping prior to the gate valve (#14) and must be sized to discharge the total flow of the pump at a pressure less than or equal to the working pressure of the storage tank. This item is required whenever the pump is capable of operating at a pressure greater than the working pressure of the storage tank.
11. **Sample Tap:** must be located down stream of the check valve and before the gate valve isolating the well from the system (#14).
12. **Gate valve:** for blow-off.
13. **Blow-off:** must be located down stream of the meter (#9) and before the gate valve (#14) for isolating the well from the system.
14. **Gate Valve:** for isolating the well from the system.
15. **Sanitary Well Seal:** all openings other than the screened vent (#5) shall be effectively sealed against the entrance of water under all conditions.
16. **Electric Cable:** must be enclosed in conduit and meet the requirements of the National Electric Code.
17. **Jet Pump and Motor:** shown with pressure switch mounted on motor housing.
18. **Gate valve:** for isolating the tank from the distribution system.
19. **Bladder Tank:** this type of tank may be used on either jet pump or submersible pump systems although it is not shown on the Submersible Pump Well Head Diagram.
20. **Well Head Protection:** the well head must be protected from freezing and from vandalism by a lockable protective cover or pump house.



C. Earl Hunter, Commissioner

*Promoting and protecting the health of the public and the environment*

April 11, 2007

Stan Brown  
WATERHEAD LLC, DBA Rock At Jocassee  
171 Sliding Rock Rd.  
Pickens, SC 29671

Re: Rock at Jocassee  
Potable Water System Sanitary Survey  
Pickens County, System # 3970300

Dear Mr. Brown:

On March 22, 2007 the Greenville EQC District Office conducted a sanitary survey of Waterhead LLC, DBA Rock at Jocassee public water system. The intent of a sanitary survey is to evaluate a system's ability to produce and distribute a safe drinking water supply. Your cooperation during this inspection was greatly appreciated.

The enclosed sanitary survey report represents an official notification of the results of our evaluation. Persons responsible for operation and maintenance of the ground water system should promptly review this report. It consists of system characteristics and statistical information (page 1); ground water source information (page 2); and a comprehensive rating page which addresses different aspects of system operation, maintenance, and record keeping. Ratings fall under the following three categories: Satisfactory (S), Insufficient/Needs Improvement (I) or Unsatisfactory (U) - (page 3). Departmental comments and/or recommendations for appropriate corrective actions for all items marked I or U on page 3 of the report have been discussed below:

#### GENERAL INFORMATION

Waterhead LLC DBA Rock at Jocassee is classified as a "Transient, Non-Community Water System" or N system. Drinking water is supplied by three wells. Well #1 is a drilled well 130 ft, with a 2 hp pump and a test yield of 32gpm located front left of Gauley Falls Condos. Well #2 is a drilled well 663 ft, with a 15 hp pump and a test yield of 111gpm located right of tee box #13. Well #3 is a drilled well 363 ft, with a .15 hp pump and a test yield of 65gpm located on Fairway #13 it feeds only two toilets, no drinking water. There are two storage tanks, a 10,000gal and a 2,000 gal located off of Whispering Fall Drive. The well provides water to 10 residential and thirty-two non-residential connections.

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Page 3 of 3

Waterhead LLC, DBA Rock at Jocassee

April 11, 2007

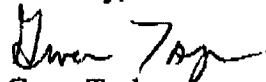
7. **FACILITY MAINTENANCE** – The purpose of this item is to evaluate the overall facility maintenance practices of the water system including all treatment facilities, storage and treatment buildings, and the grounds around the facilities. During the survey on 3/22/07 it was noted some housekeeping is needed and trash in the pump house need to be removed in well #3. This item was rated as satisfactory.
8. **PROCEDURES MANUAL** – The purpose of this item is to ensure that a water system maintains written procedures for the operation and maintenance of its system. *South Carolina Primary Drinking Water Regulation, Section R.61-58.7B (2)* states "Each system shall have and maintain up-to-date written Standard Operating Procedures for the operation and maintenance of its system. These procedures shall include but not limited to:
- a) Preventative maintenance schedules on equipment
  - b) Reporting and public notification requirements
  - c) Sample siting plans
  - d) Valve and hydrant maintenance procedures
  - e) Distribution system flushing
  - f) Disinfect ion requirements for the repair of wells, tanks, and water lines
  - g) Cross-connection control program
  - h) Leak detection and repair program
  - i) Safety procedures
  - j) Detailed instructions on starting and stopping any treatment plant

All of the aforementioned items are required by state law and should be incorporated into a written Standard Operating Procedures Manual for Waterhead LLC, DBA Rock at Jocassee. This item was rated as needing improvement.

9. **CONSUMER CONFIDENCE REPORT**: This report was not available at the time of inspection. Need to send a copy of most recent report. This item was rated as N.

At the time of inspection David Harris, Distribution Operator and Gwen Taylor – Greenville EQC were present. Detailed record keeping should be a priority for system owners in order to satisfy existing regulations. It is recommended that the forms given be utilized and maintained. The overall rating from the Sanitary Survey conducted on 3/22/07 is **SATISFACTORY**; thus a written response is not necessary. Should you have any further questions or comments regarding this matter, please do not hesitate to contact me at (864) 241-1090.

Sincerely,



Gwen Taylor

Environmental Health Manager  
Greenville EQC District

GT/gt  
Enclosure

## SCDHEC

## Public Water System Source/Plant Inventory Report

## Bureau of Water

System Name: ROCK AT JOCASSEE THE

System Number: 3970300

Source ID: G39118

(A)dd, (M)odify, (R)enum, (D)elate: M

Reason:

Sanitary Survey

Today's Date:

3/22/07

## General Information

Location ..... FRONT LEFT OF GAULEY Falls Condo  
Source Name ..... WELL ONE  
Receiving Plant ..... Gauley Falls Condos  
Plant ID ..... B39007

Availability Code ..... P  
Latitude ..... 34.99907500  
Longitude ..... -82.78022120  
Source Code ..... G

## Ground Water Source Information

## Well Characteristics

Depth (ft) ..... 130  
Type ..... 1  
Casing Diameter (in) ..... 6  
Casing Type ..... G  
Under the Direct Influence of SW? .. N

## Well Pump Characteristics

Horsepower ..... 2.00  
Type ..... S  
Design Yield (gpm) ..... 40.00  
Test Yield (gpm) ..... 32.00  
Avg. Daily Production (TGD) .. 7.19  
Regulated Capacity (TGD) ... 38.40

## Treatment Codes

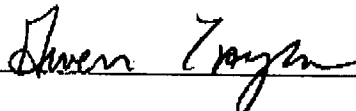
N9970

## Comments

3/20/06 7582610  
3/22/07 0054010 + 999999

~~and sent to owner and~~  
~~near~~  
check values to be checked

Signature:



**SCDHEC**  
**Bureau of Water****Public Water System Source/Plant Inventory Report**

System Name: ROCK AT JOCASSEE THE

System Number: 3970300

Source ID: G39165

(A)dd, (M)odify, (R)enum, (D)elete: ☒ MReason: Sanitary SurveyToday's Date: 3/22/07**General Information**

Location: Fairway #13

Source Name: Right Well + 3

Receiving Plant: Fairway #13

Plant ID: 839009

Availability Code: P

Latitude: 34.98527778

Longitude: -82.78111111

Source Code: G

**Ground Water Source Information****Well Characteristics**

Depth (ft): 363

Type: 1

Casing Diameter (in): 6

Casing Type: G

Under the Direct Influence of SW?: N

**Well Pump Characteristics**Horsepower: 1/2 - 15

Type: S

Design Yield (gpm): 65.00

Test Yield (gpm): 400.00

Avg. Daily Production (TGD): 350.00

Regulated Capacity (TGD): 0.00

**Treatment Codes**

N9970

**Comments**~~Casing hole pump not working~~

no meter

Feeds two toilets only  
no drinking water

Need to be cleared out

Signature: [Signature]



**SCDHEC**  
**Bureau of Water****Public Water System Source/Plant Inventory Report**

System Name: ROCK AT JOCASSEE THE  
System Number: 3970300  
Source ID: B39008

(A)dd, (M)odify, (R)enum, (D)elte: ☒ M  
Reason: Sanitary Survey  
Today's Date: 3/22/07

**Plant Source Information**

Plant Name ..... Tee Box #13  
Plant Phone .....  
Plant Type ..... B

Average Production (MGD) ..... 0.0000  
Total Capacity (MGD) ..... 0.0000  
Emergency Capacity (MGD) ..... 0.0000

**Geographical Address****Treatment Codes**

C7412, D4210

**Comments**

Signature: Shirley Taylor

**SCDHEC****Bureau of Water****Public Water System Sanitary Survey Report  
Ground Water Systems**

System name: ROCK AT JOCASSEE THE

System number: 3970300

Last Survey: 03/14/2006

Survey Date: 3/22/07

**SOURCE:**

- 1. Quantity ..... S
- 2. Protection from Contam. .... ~~S~~ I
- 3. Security ..... S
- 4. Wellhead Piping ..... ~~S~~ I
- 5. Pumps ..... S
- 6. Flow Measuring Device ..... S

**WATER TREATMENT:**

- 7. Filtration\* ..... S
- 8. Equipment Maintenance\* .... S
- 9. Chemical Storage & Hand.\* .. S
- 10. Chemical Feed\* ..... S
- 11. Chemical Injection Points\* ... S

**DISTRIBUTION:**

- 12. Water Quality ..... S
- 13. Operation & Control ..... S
- 14. Adequate Pressure ..... S
- 15. Fire Flow ..... S
- 16. Cross Connection Control .. ~~S~~ I
- 17. Valve/Hydrant Maintenance .. ~~S~~ I
- 18. Flushing Program ..... ~~S~~ I
- 19. Leak Detection and Repair. .. ~~S~~ I
- 20. System Map ..... S
- 21. Sample Siting Plan ..... S
- 22. Disinfectant Residual\* ..... S

**STORAGE:**

- 23. Capacity ..... S
- 24. Sanitary Protection ..... S
- 25. Security ..... S
- 26. Appurtenances ..... S
- 27. Maintenance ..... S

**OPERATIONAL CONTROL:**

- 28. Certified Operator/Staffing\* .. S
- 29. Testing Equipment\* ..... S
- 30. Monitoring/Records ..... S

**GENERAL O & M:**

- 31. Plant Security\* ..... S
- 32. Facility Maintenance ..... S
- 33. Supplies/Spare Parts Inv. .... S
- 34. Waste Disposal\* ..... S
- 35. Procedures Manual ..... ~~S~~ I

**EMERGENCY OPERATION:**

- 36. Stand-by Power ..... S
- 37. Emergency Plan ..... S
- 38. Drought Response Plan\*\* .... N

**CONSUMER CONFIDENCE REPORTS:**

- 39. CCR (Y/N) ..... ~~N~~ N

**A. System Group (I - V) .....****B. Operator Grade**

- A. .... S
- B. .... S
- C. .... S
- D. .... S
- T. .... S

**C. Dist. Group (I - V) .....****D. Distribution Operator Grade**

- A. .... S
- B. .... S
- C. .... S
- D. .... S
- T. .... S
- G. .... S

**E. Field Tests**

- Chlorine ..... S
- pH ..... S
- poi ..... S
- Other ..... S

**S. Samples Taken**

- Bacteriological ..... S
- Inorganic ..... S
- Organic ..... S
- Radiological ..... S
- Other ..... S

**F. Type Inspection/Visit ... GW ROUTINE**

- G. Are all services metered? ..... N
- Percent metered ..... S
- H. Is system presently under order? ..... N
- If Yes, is system complying w/order? ..... N

- I. Follow up scheduled? ..... N
- Date scheduled ..... S

- J. Overall Rating ..... S

- K. Operator/Owner present? ..... Y

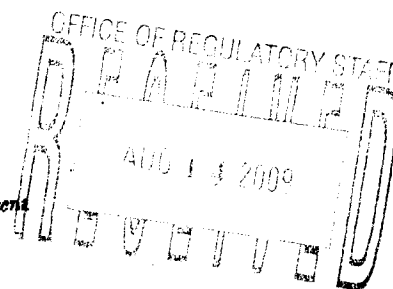
\*Applicable for treated systems only.

\*\*Applicable for part 1 and 2 systems only.

This form represents neither a final approval of the water system, nor an approval to operate the system.



C. Earl Hunter, Commissioner

*Promoting and protecting the health of the public and the environment*

April 11, 2007

Stan Brown  
WATERHEAD LLC, DBA Rock At Jocassee  
171 Sliding Rock Rd.  
Pickens, SC 29671

Re: Rock at Jocassee  
Potable Water System Sanitary Survey  
Pickens County, System # 3950008

Dear Mr. Brown:

On March 22, 2007 the Greenville EQC District Office conducted a sanitary survey of Waterhead LLC, DBA Rock at Jocassee public water system. The intent of a sanitary survey is to evaluate a system's ability to produce and distribute a safe drinking water supply. Your cooperation during this inspection was greatly appreciated.

The enclosed sanitary survey report represents an official notification of the results of our evaluation. Persons responsible for operation and maintenance of the ground water system should promptly review this report. It consists of system characteristics and statistical information (page 1); ground water source information (page 2); and a comprehensive rating page which addresses different aspects of system operation, maintenance, and record keeping. Ratings fall under the following three categories: Satisfactory (S), Insufficient/Needs Improvement (I) or Unsatisfactory (U) - (page 3). Departmental comments and/or recommendations for appropriate corrective actions for all items marked I or U on page 3 of the report have been discussed below:

#### **GENERAL INFORMATION**

Waterhead LLC DBA Rock at Jocassee is classified as a "State Water System" or S system. Well #1 is a drilled well 490ft it has no pump and is not being used for supply. It is located nearest the road behind the stables. Well #2 is a drilled well 310 ft, with a 5 hp pump and a design yield of 116gpm located behind stables below the treatment building. There is 1,500 gal of storage. The well provides water to 6 residential and 5 non-residential connections with a population of 14.

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Region 2

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Page 2 of 3

Waterhead LLC, DBA Rock at Jocassee

April 11, 2007

#### **FINDINGS & RECOMMENDATIONS:**

1. **SOURCE PROTECTION FROM CONTAMINATION** - The purpose of this item is to ensure that all ground water sources are properly protected from contamination due to surface water run-off, local ground contamination, and/or contamination due to animals or insects. Maintaining the proper casing, concrete pad, seal and venting at the wellhead can accomplish this. A 100-foot pollution free radius must be maintained in areas surrounding the well. The concrete pad should be sufficient in size to cover the area immediately around the well and must be free of full-depth cracking which would allow the flow of surface water through the pad into the soil surrounding the well casing. The sanitary seal should be in good shape and should not have any gaps (including areas where the wiring to the submersible pump passes through the seal). During the sanitary survey on 3/22/07, the department noted on Well #2 a gap in the sanitary seal around the vent that needs to be caulked. This item was rated as needing improvement.
2. **WELLHEAD PIPING** - The purpose of this item is to ensure that the wellhead piping is configured in such a way as to minimize the potential for contamination of the source while also providing the proper testing and control of the well. During the survey on 03/22/07 it was noted the check valves, on Well #1 need to be checked to see if it is functioning properly. This item was rated as needing improvement.
3. **VALVE MAINTENANCE** - The purpose of this item is to ensure that a system's valves are being maintained such that they may be located and operated as needed. All major valves on a water system must be operated a minimum of once a year. When a deficient valve is noted, it should be repaired or replaced. A written valve maintenance program must be developed for this system. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
4. **FLUSHING PROGRAM** - The purpose of this item is to ensure that the system's routine Flushing program is adequate to help prevent customer complaints and water quality problems associated with stagnant, discolored, and sediment-laden water. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
5. **CROSS CONNECTION CONTROL** - The purpose of this item is to ensure that the water system has a program in place to identify and eliminate cross-connections between public water system and possible sources of contamination. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
6. **LEAK DETECTION AND REPAIR** - The purpose of this item is to ensure that the water system is actively searching for water line leaks and using sanitary practices to repair those leaks. Water audit, visual inspection and audible inspections can be used for leak detection. Leak repair procedures must be fully documented. A guidance document will be provided to maintain this information. This item was rated as needing improvement.

Page 3 of 3

Waterhead LLC, DBA Rock at Jocassee

April 11, 2007

- d) Valve and hydrant maintenance procedures
- e) Distribution system flushing
- f) Disinfect ion requirements for the repair of wells, tanks, and water lines
- g) Cross-connection control program
- h) Leak detection and repair program
- i) Safety procedures
- j) Detailed instructions on starting and stopping any treatment plant

All of the aforementioned items are required by state law and should be incorporated into a written Standard Operating Procedures Manual for Waterhead LLC, DBA Rock at Jocassee. This item was rated as needing improvement.

At the time of inspection David Harris, Distribution Operator and Gwen Taylor – Greenville EQC were present. Detailed record keeping should be a priority for system owners in order to satisfy existing regulations. It is recommended that the forms given be utilized and maintained. The overall rating from the Sanitary Survey conducted on 3/22/07 is **SATISFACTORY**; thus a written response is not necessary. Should you have any further questions or comments regarding this matter, please do not hesitate to contact me at (864) 241-1090.

Sincerely,



Gwen Taylor

Environmental Health Manager  
Greenville EQC District

GT/gt  
Enclosure

**SCDHEC****Bureau of Water****Public Water System Sanitary Survey Report  
Ground Water Systems**

System name: WATERHEAD LLC DBA

System number: 3950008

Last Survey: 03/14/2008

Survey Date: 3/22/09

**SOURCE:**

- 1. Quantity..... S
- 2. Protection from Contam..... S
- 3. Security..... S
- 4. Wellhead Piping..... S
- 5. Pumps..... S
- 6. Flow Measuring Device..... U

**WATER TREATMENT:**

- 7. Filtration\*.....
- 8. Equipment Maintenance\*.....
- 9. Chemical Storage & Handl.\*.....
- 10. Chemical Feed\*.....
- 11. Chemical Injection Points\*.....

**DISTRIBUTION:**

- 12. Water Quality..... S
- 13. Operation & Control..... S
- 14. Adequate Pressure..... S
- 15. Fire Flow..... N
- 16. Cross Connection Control..... SI
- 17. Valve/Hydrant Maintenance..... I
- 18. Flushing Program..... SI
- 19. Leak Detection and Repair..... SI
- 20. System Map..... S
- 21. Sample Siting Plan..... S
- 22. Disinfectant Residual\*..... N

**STORAGE:**

- 23. Capacity..... S
- 24. Sanitary Protection..... S
- 25. Security..... S
- 26. Appurtenances..... S
- 27. Maintenance..... S

**OPERATIONAL CONTROL:**

- 28. Certified Operator/Staffing\*..... S
- 29. Testing Equipment\*..... S
- 30. Monitoring/Records..... S

**GENERAL O & M:**

- 31. Plant Security\*..... S
- 32. Facility Maintenance..... I
- 33. Supplies/Spare Parts Inv..... S
- 34. Waste Disposal\*..... N
- 35. Procedures Manual..... I

**EMERGENCY OPERATION:**

- 36. Stand-by Power..... N
- 37. Emergency Plan..... S
- 38. Drought Response Plan\*\*..... N

**CONSUMER CONFIDENCE REPORTS:**

- 39. CCR (Y/N)..... N

**A. System Group (I - V).....****B. Operator Grade**

- A..... 1
- B.....
- C.....
- D.....
- T.....

**C. Dist. Group (I - V).....****D. Distribution Operator Grade**

- A.....
- B.....
- C.....
- D.....
- T..... 1
- G.....

**E. Field Tests**

- Chlorine.....
- pH.....
- psi.....
- Other.....

**S. Samples Taken**

- Bacteriological.....
- Inorganic.....
- Organic.....
- Radiological.....
- Other.....

**F. Type Inspection/Visit..... GW ROUTINE**

- G. Are all services metered?..... N
- Percent metered.....

- H. Is system presently under order?..... N
- If Yes, is system complying w/order?..... N

- I. Follow up scheduled?..... N
- Date scheduled.....

- J. Overall Rating..... S

- K. Operator/Owner present?..... Y

\*Applicable for treated systems only.

\*\*Applicable for part 1 and 2 systems only.

This form represents neither a final approval of the water system, nor an approval to operate the system.

**SCDHEC**  
**Bureau of Water****Public Water System Source/Plant Inventory Report**

System Name: WATERHEAD LLC DBA

System Number: 3950008

Source ID: G39144

(A)dd, (M)odify, (R)enum, (D)elate: MReason: 3/22/07 Sanitary SurveyToday's Date: 3/22/07**General Information**

Location ..... NEAREST ROAD Behind Stables  
Source Name ..... WELL #1  
Receiving Plant ..... TREATMENT PLANT  
Plant ID ..... B39006

Availability Code ..... P  
Latitude ..... 34.99680440  
Longitude ..... -82.78431790  
Source Code ..... G

**Ground Water Source Information****Well Characteristics**

Depth (ft) ..... 490  
Type ..... 1  
Casing Diameter (in) ..... 8  
Casing Type ..... G  
Under the Direct Influence of SW? .. N

**Well Pump Characteristics**

Horsepower ..... ~~25.88~~ 0.0  
Type ..... S  
Design Yield (gpm) ..... 52.00  
Test Yield (gpm) ..... 0.00  
Avg. Daily Production (TGD) .. 0.00  
Regulated Capacity (TGD) ... 111.36

**Treatment Codes**

N9970

*No pump - in casing not using it for supply*

Signature: *[Signature]*

**SCDHEC  
Bureau of Water****Public Water System Source/Plant Inventory Report**

System Name: WATERHEAD LLC DBA  
System Number: 3950008  
Source ID: B39006

(A)dd, (M)odify, (R)enum, (D)elate: ☒   
Reason: Sanitary Survey  
Today's Date: 3/22/07

**Plant Source Information**

Plant Name ..... TREATMENT PLANT  
Plant Phone .....  
Plant Type ..... B

Average Production (MGD) .... 0.0000  
Total Capacity (MGD) ..... 0.0000  
Emergency Capacity (MGD) .... 0.0000

Geographical Address

**Treatment Codes**

~~ST402, B4210~~ N000

**Comments**

No treatment does not get Sanitary  
NO Backflow preventer

Signature: 





**SCDHEC**  
**Bureau of Water****Public Water System Source/Plant Inventory Report**

System Name: WATERHEAD LLC DBA  
System Number: 3850008  
Source ID: G39145

(A)dd, (M)odify, (R)emove, (D)elete: **M**  
Reason: Sanitary Survey  
Today's Date: 3/22/07

**General Information**

Location ..... WELL #2 behind Stables below <sup>treatment</sup> ~~tank~~ Bldg  
Source Name ..... ~~BELOW-TRMNT-BLDG~~ Well #2  
Receiving Plant ..... TREATMENT PLANT  
Plant ID ..... B39006

Availability Code ..... P  
Latitude ..... 34.99682420  
Longitude ..... -82.76419270  
Source Code ..... G

**Ground Water Source Information****Well Characteristics**

Depth (ft) ..... 310  
Type ..... 1  
Casing Diameter (in) ..... 6  
Casing Type ..... G  
Under the Direct Influence of SW? .. N

**Well Pump Characteristics**

Horsepower ..... 5.00  
Type ..... S  
Design Yield (gpm) ..... 116.00  
Test Yield (gpm) ..... 0.00  
Avg. Daily Production (TGD) .. 0.00  
Regulated Capacity (TGD) ... 111.36

**Treatment Codes**

N9970

**Comments**

Broken flow meter. 03/20/06 mec.

Signature: Dwain Taylor

**SCDHEC****Bureau of Water****Public Water System Sanitary Survey Report  
Ground Water Systems**

System name: WATERHEAD LLC DBA

System number: 3950008

Last Survey: 03/14/2008

Survey Date: 3/23/07**Comments**

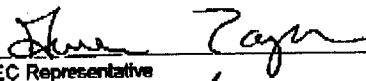
1. Need concrete at well head - Per Enforcement (Cola).

John Holcomb - B Distribution 441

George Harris Lic # T 2326 Distribution  
Exp 6/30/07meter does not work - this is the one with ant problem  
no treatment & not being tested

meter needs to be replaced

well house needs to be cleaned out.

Need procedures manual to include, flushing, leak detection  
and repair, valve maintenance  
DHEC Representative  
System RepresentativeDis. oper.  
Title

**SCDHEC****Public Water System Inventory Report Form****Bureau of Water**

System Name: WATERHEAD LLC DBA

System Number: 3950008

Fax Number: (864)878-0201

(A)dd, (M)odify, (R)enum, (D)ele: MReason: Sanitary SurveyToday's Date: 3/22/07**Mailing Address:**

STAN BROWN

WATERHEAD LLC DBA

PICKENS, SC 29671

Telephone: (864)270-1431

**Geographical/Contact Address (if different):**

DAVID HARRIS

ROCK AT JOCASSEE

PICKENS, SC 29671

Emergency Telephone: (864)878-6172

Contact Telephone: (864)878-8087

**System Characteristics**

System Type... S	Inact Code.....	Service Area... R1	Season On (mo/day)..... 01/01
Subtype.....	Inact Date (mo/yr)....	Counties Served:	Season Off (mo/day)..... 12/31
Owner Type.... PRIV	Begin Date (mo/yr)... 01/1991	39	

**Statistical Information****Source Use Information:**

Percent Surface Water.....	0
Percent Ground Water.....	100
Percent Purchased Surface Water...	0
Percent Purchased Ground Water....	0

Total must equal 100%

Number of Surface Water Sources...	0
Number of Ground Water Sources...	2
Purchased Surface Water Sources...	0
Number of Permanent SW Sources...	0
Number of Emergency SW Sources...	0
Number of Permanent GW Sources...	2
Number of Emergency GW Sources...	0

**Service Population:**

Population.....	18,134
Secondary Population.....	0

**Number of Service Connections:**

Residential.....	106	Total... 111
Non Residential.....	5	
Maximum Allowable.....	49	
Permitted.....	0	

**Production (MGD):**

Average.....	0.0000
Maximum Day.....	0

**Capacity:**

Total.....	0
Emergency.....	0.0000

**Storage:**

Elevated (MG).....	0.000
Ground (MG).....	0.000
Pressure (TG).....	1.500

**Comments**Signature: Sharon Taylor

Page 2 of 3

Waterhead LLC, DBA Rock at Jocassee

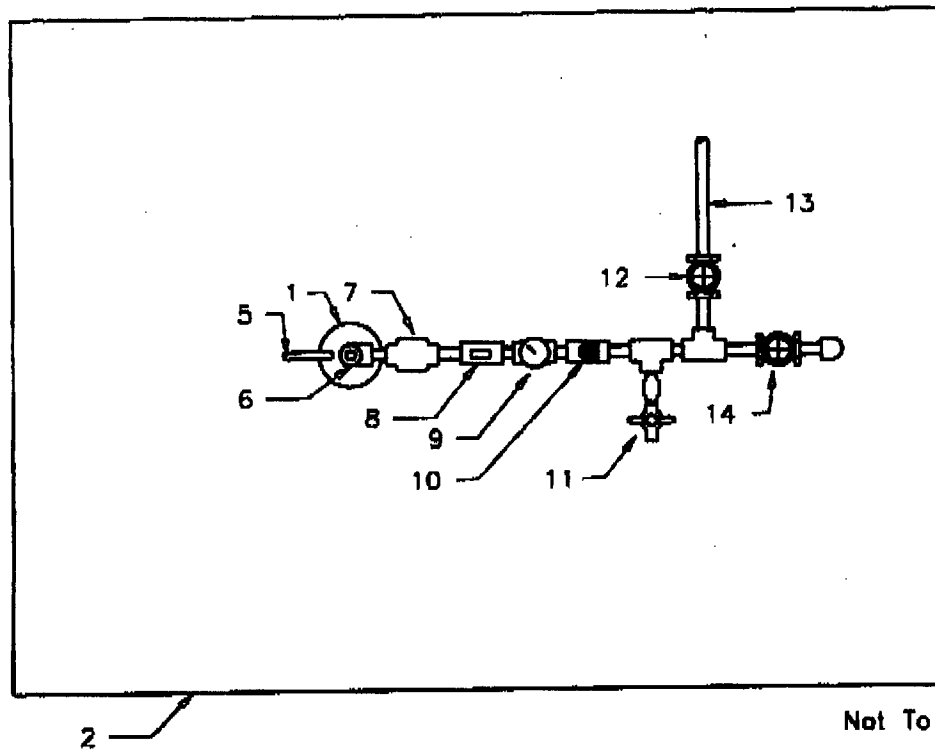
April 11, 2007

#### **FINDINGS & RECOMMENDATIONS:**

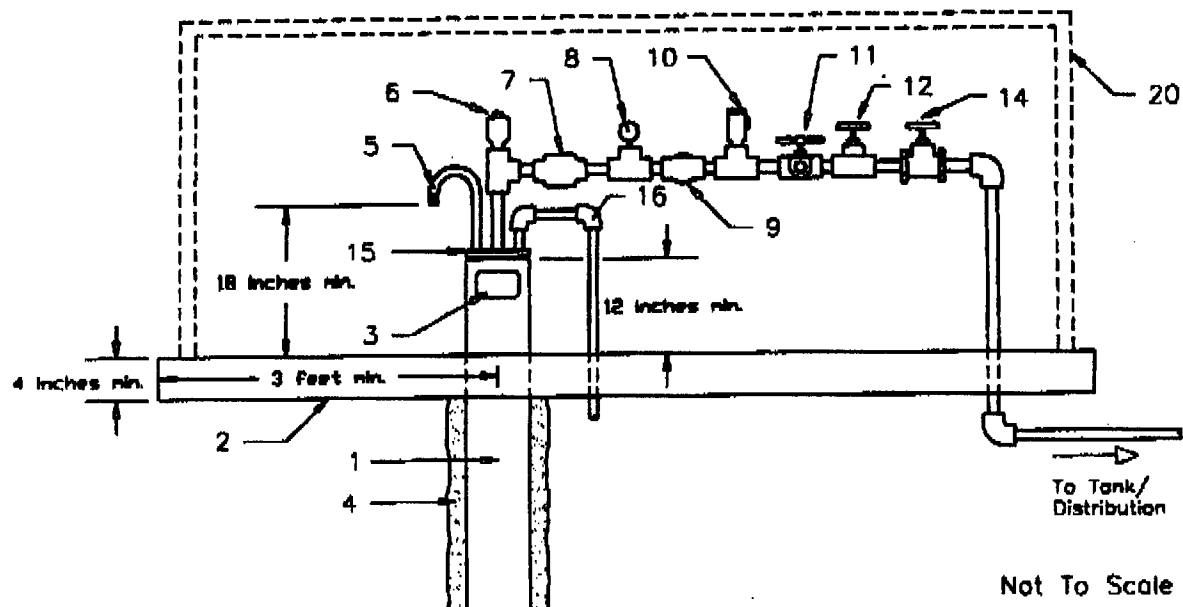
1. **FLOW MEASURING DEVICE** – The purpose of this item is to ensure that each public water supply well is equipped with an acceptable means of measuring flow. Each water system needs to accurately account for all water that is produced from each water source. The meter on Well#2 is broken and needs to be replaced. This item was rated as unsatisfactory.
2. **VALVE MAINTENANCE** – The purpose of this item is to ensure that a system's valves are being maintained such that they may be located and operated as needed. All major valves on a water system must be operated a minimum of once a year. When a deficient valve is noted, it should be repaired or replaced. A written valve maintenance program must be developed for this system. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
3. **FLUSHING PROGRAM** – The purpose of this item is to ensure that the system's routine Flushing program is adequate to help prevent customer complaints and water quality problems associated with stagnant, discolored, and sediment-laden water. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
4. **CROSS CONNECTION CONTROL** – The purpose of this item is to ensure that the water system has a program in place to identify and eliminate cross-connections between public water system and possible sources of contamination. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
5. **LEAK DETECTION AND REPAIR** – The purpose of this item is to ensure that the water system is actively searching for water line leaks and using sanitary practices to repair those leaks. Water audit, visual inspection and audible inspections can be used for leak detection. Leak repair procedures must be fully documented. A guidance document will be provided to maintain this information. This item was rated as needing improvement.
6. **FACILITY MAINTENANCE** – The purpose of this item is to evaluate the overall facility maintenance practices of the water system including all treatment facilities, storage and treatment buildings, and the grounds around the facilities. During the survey on 3/22/07 it was noted some housekeeping is needed in the pump house of Well #2. It is also noted that the pump house has an ant problem. This item was rated as needing improvement.
7. **PROCEDURES MANUAL** – The purpose of this item is to ensure that a water system maintains written procedures for the operation and maintenance of its system. *South Carolina Primary Drinking Water Regulation*, Section R.61-58.7B (2) states "Each system shall have and maintain up-to-date written Standard Operating Procedures for the operation and maintenance of its system. These procedures shall include but not limited to:
  - a) Preventative maintenance schedules on equipment
  - b) Reporting and public notification requirements
  - c) Sample siting plans

**Diagram 2: Submersible Pump Well Head Diagram**

### Plan View



### Profile View



**SCDHEC****Bureau of Water****Public Water System Sanitary Survey Report  
Ground Water Systems**

Site name: GAULEY FALLS W/S

System number: 3950004

Last Survey: 03/25/2008

Survey Date: 4/28/09**SOURCE:**

- ☒ 1. Quantity ..... S  
☒ 2. Protection from Contam. .... S  
☒ 3. Security ..... S  
☒ 4. Wellhead Piping ..... **U**  
☒ 5. Pumps ..... S  
☒ 6. Flow Measuring Device .... S

**WATER TREATMENT:**

- ☒ 7. Filtration\* .....  
☒ 8. Equipment Maintenance\* ....  
☒ 9. Chemical Storage & Hand.\* ..  
☒ 10. Chemical Feed\* .....  
☒ 11. Chemical Injection Points\* ..

**DISTRIBUTION:**

- ☒ 12. Water Quality ..... S  
☒ 13. Operation & Control ..... S  
☒ 14. Adequate Pressure ..... S  
☒ 15. Fire Flow ..... N  
☒ 16. Cross Connection Control .. S  
☒ 17. Valve/Hydrant Maintenance S  
☒ 18. Flushing Program ..... S  
☒ 19. Leak Detection and Repair .. S  
☒ 20. System Map ..... S  
☒ 21. Sample Siting Plan ..... S  
☒ 22. Disinfectant Residual\* .....

**STORAGE:**

- ☒ 23. Capacity ..... S  
☒ 24. Sanitary Protection ..... S  
☒ 25. Security ..... S  
☒ 26. Appurtenances ..... S  
☒ 27. Maintenance ..... S

**OPERATIONAL CONTROL:**

- ☒ 28. Certified Operator/Staffing\* N  
☒ 29. Testing Equipment\* ..... N  
☒ 30. Monitoring/Records ..... S

**GENERAL O & M:**

- ☒ 31. Plant Security\* ..... N  
☒ 32. Facility Maintenance ..... S  
☒ 33. Supplies/Spare Parts Inv. .... S  
☒ 34. Waste Disposal\* ..... N  
☒ 35. Procedures Manual ..... S

**EMERGENCY OPERATION:**

- ☒ 36. Stand-by Power ..... N  
☒ 37. Emergency Plan ..... S  
☒ 38. Drought Response Plan\*\* .... Y

**CONSUMER CONFIDENCE REPORTS:**

- ☒ 39. CCR (Y/N) ..... N

**A. System Group (I - V) .....****B. Operator Grade**

- A. ....  
 B. ....  
 C. ....  
 D. ....  
 T. ....

**C. Dist. Group (I - V) .....****D. Distribution Operator Grade**

- A. ....  
 B. .... 1  
 C. ....  
 D. .... 1  
 T. ....  
 G. ....

**E. Field Tests**

- Chlorine. ....  
 pH. ....  
 psi. ....  
 Other. ....

**S. Samples Taken**

- Bacteriological. ....  
 Inorganic. ....  
 Organic. ....  
 Radiological. ....  
 Other. ....

**F. Type Inspection/Visit. .... GW ROUTINE**

- G. Are all services metered? ..... **Y**  
 Percent metered. ....

- H. Is system presently under order? ..... N  
 If Yes, is system complying w/order? N

- I. Follow up scheduled? ..... **Y**  
 Date scheduled. .... 4/15/09

- ☒ Overall Rating. .... **B I**  
☒ Operator/Owner present? ..... Y

\*Applicable for treated systems only.

\*\*Applicable for part 1 and 2 systems only.

This form represents neither a final approval of the water system, nor an approval to operate the system.

**SCDHEC**  
**Bureau of Water**
**Public Water System Source/Plant Inventory Report**

Site Name: GAULEY FALLS W/S  
 System Number: 3950004  
 Source ID: G39105

(A)dd, (M)odify, (R)enum, (D)elate: ☒  
 Reason: Sanitary Survey  
 Today's Date: 4/28/09

**General Information**

Location: On Hwy 178.  
 Source Name: WELL ONE  
 Receiving Plant: NONE  
 Plant ID: NONE

Availability Code: P  
 Latitude: 34.99378480  
 Longitude: -82.76066250  
 Source Code: G

**Ground Water Source Information**
**Well Characteristics**

Depth (ft): 168  
 Type: 1  
 Casing Diameter (in): 6  
 Casing Type: G  
 Under the Direct Influence of SW? N

**Well Pump Characteristics**

Horsepower: 10.00  
 Type: S  
 Design Yield (gpm): 60.00  
 Test Yield (gpm): 24.00  
 Avg. Daily Production (TGD): 9.20  
 Regulated Capacity (TGD): 23.04

**Treatment Codes**

N0000

**Comments**

1,408,600 gal used Apr 2006 to March 2007  
 4,501,800 gal used Apr 2007 to March 2008  
 2,027,920 gal used Apr 2008 to Apr 16/09

**Sample Siting plan**

1. James H. King 201 Belvoir Dr.
2. 121 Fulton Court
3. 189 273 Belvoir Dr.
4. 6354 Hwy 11
5. 2111 Moorfield Memorial Hwy (178)

John Holcombe Grade B #441  
 George Harris Trainee  
 T2326  
 Exp 6/30/09

Signature: James King



Page 2 of 2  
Gauley Falls W/S (Rock at Jocassee)  
May 5, 2009

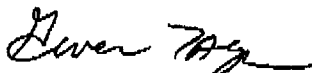
## **FINDINGS AND RECOMMENDATIONS:**

**WELLHEAD PIPING** – The purpose of this item is to ensure that the wellhead piping is configured in such a way as to minimize the potential for contamination of the source while also providing the proper testing and control of the well. During the survey on 4/28/09 it was noted that the check valve was downstream/after the flow meter. The Check Valve should be the first appurtenance after the well pump. This will prevent any potentially contaminated water from entering the well when the pump is not running. The Flow Meter must be after the check valve and before the blow off such that all water discharged from the well will be routed through the meter. Also remember to disinfect after repair of wells, tanks and water lines. A guidance document will be provided. This item was rated as **Unsatisfactory**.

**FACILITY MAINTENANCE** – The purpose of this item is to evaluate the overall facility maintenance practices of the water system including all treatment facilities, storage and treatment buildings, and the grounds around the facilities. During the survey on 4/28/09 it was noted that the bushes needed to be cleared out surrounding the tank.

At the time of inspection, Mr. Harris and Gwen Taylor- Greenville EQC were present. Detailed record keeping should be a priority for system owners in order to satisfy existing regulations. It is recommended that the forms enclosed be utilized and maintained. The overall rating from the Sanitary Survey conducted on 04/23/09 is **NEEDS IMPROVEMENT**; thus a written response is necessary. Should you have any further questions or comments regarding this matter, please do not hesitate to contact me at (864) 241-1090.

Sincerely,



Gwen Taylor  
Environmental Health Manager  
Region 2, Greenville EQC

GT/gt  
Enclosure

**SCDHEC**  
**Bureau of Water****Public Water System Sanitary Survey Report**  
**Ground Water Systems**

System name: ROCK AT JOCASSEE THE

System number: 3970300

Last Survey: 03/14/2006

Survey Date: 3/22/07

**Comments**

- Need copy of CCR
- need keep log of valve maint, flushing, leak detection & repairs
- ~~need~~ need procedures manual
- Need to check the valves on well #2
- need to seal the vent on well head on well #2
- need to do some house keeping on well #3 needs to be cleared out.

  
DHEC Representative  
System Representative  
Title

## SCDHEC

## Public Water System Source/Plant Inventory Report

## Bureau of Water

System Name: ROCK AT JOCASSEE THE

System Number: 3970300

Source ID: B39009

(A)dd, (M)odify, (R)enum, (D)elate: M

Reason:

Today's Date:

Sanitary Survey  
3/22/07

## Plant Source Information

Plant Name ..... Fairway #13

Plant Phone .....

Plant Type ..... B

Average Production (MGD) ..... 0.0000

Total Capacity (MGD) ..... 0.0000

Emergency Capacity (MGD) ..... 0.0000

Geographical Address

## Treatment Codes

## Comments

~~not using~~~~no treatment~~

no treatment

Signature:



**SCDHEC  
Bureau of Water****Public Water System Source/Plant Inventory Report**

System Name: ROCK AT JOCASSEE THE  
System Number: 3970300  
Source ID: B39007

(A)dd, (M)odify, (R)enum, (D)elte: ☒

Reason:

Today's Date:

Sanitar Survey  
3/22/07**Plant Source Information**

Plant Name ..... Gauley Falls Condos  
Plant Phone .....  
Plant Type ..... B

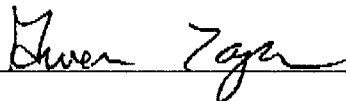
Average Production (MGD) .... 0.0000  
Total Capacity (MGD) ..... 0.0000  
Emergency Capacity (MGD) .... 0.0000

**Geographical Address****Treatment Codes**

C7412, D4210

**Comments**

Signature:



**SCDHEC**  
**Bureau of Water**
**Public Water System Source/Plant Inventory Report**

System Name: ROCK AT JOCASSEE THE

System Number: 3970300

Source ID: G39164

(A)dd, (M)odify, (R)emove, (D)ele: M

Reason:

Today's Date:

Sanitary Survey  
3/22/07
**General Information**

Location ..... Right of tee box #13  
 Source Name ..... Well #2  
 Receiving Plant ..... Tee Box #13  
 Plant ID ..... B39008

Availability Code ..... P  
 Latitude ..... 34.99527778  
 Longitude ..... -82.78111111  
 Source Code ..... G

**Ground Water Source Information**
**Well Characteristics**

Depth (ft) ..... 663  
 Type ..... 2  
 Casing Diameter (in) ..... 6  
 Casing Type ..... S  
 Under the Direct Influence of SW? .. N

**Well Pump Characteristics**

Horsepower ..... 0.45- 15.  
 Type ..... S  
 Design Yield (gpm) ..... 65-90  
 Test Yield (gpm) ..... 111  
 Avg. Daily Production (TGD) .. 0.00  
 Regulated Capacity (TGD) ... 62.40

**Treatment Codes**

N897D

**Comments**

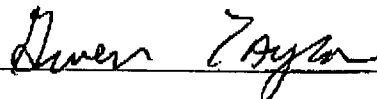
created - find the vent on well head  
 March 22, 07 025893 x 100  
 March 27, 06 013202

use chlorine bleach

no

~~check~~

Signature:



**SCDHEC****Public Water System Inventory Report Form****Bureau of Water**

System Name: ROCK AT JOCASSEE THE

(A)dd, (M)odify, (R)enum, (D)elte: M

System Number: 3970300

Reason: Sanitary Survey

Fax Number: NONE

Today's Date: 3/22/07**Mailing Address:****Geographical/Contact Address (if different):**

WATERHEAD LLC, DBA - STAN BROWN  
171 SLIDING ROCK RD  
PICKENS, SC 29671

ROCK AT JOCASSEE - DAVID HARRIS  
171 SLIDING ROCK RD  
PICKENS, SC 29671

Telephone: (864)292-2468

Emergency Telephone: (864)244-1313

Contact Telephone: (864)878-8087

**System Characteristics**

System Type . . . . . N	Inact Code . . . . .	Service Area . . . . . R9	Season On (mo/day) . . . . . 01/01
Subtype . . . . .	Inact Date (mo/yr) . . . . .	Counties Served: . . . . .	Season Off (mo/day) . . . . . 12/31
Owner Type . . . . . PRIV	Begin Date (mo/yr) . . . . . 10/1986	39	

**Statistical Information****Source Use Information:**

Percent Surface Water . . . . . 0  
Percent Ground Water . . . . . 100  
Percent Purchased Surface Water . . . . . 0  
Percent Purchased Ground Water . . . . . 0

Total must equal 100%

**Number of Service Connections:**

Residential . . . . .  
Non Residential . . . . .  
Maximum Allowable . . . . . 122  
Permitted . . . . . 0

810  
32  
Total ... 842

**Production (MGD):**

Average . . . . . 0.0100  
Maximum Day . . . . . .0108

**Capacity:**

Total . . . . . .0384  
Emergency . . . . . 0.0000

**Storage:**

Elevated (MG) . . . . . 0.000  
Ground (MG) . . . . . 0.020  
Pressure (TG) . . . . . 12.000

Number of Surface Water Sources . . . . . 0  
Number of Ground Water Sources . . . . . 3  
Purchased Surface Water Sources . . . . . 0  
Number of Permanent SW Sources . . . . . 0  
Number of Emergency SW Sources . . . . . 0  
Number of Permanent GW Sources . . . . . 3  
Number of Emergency GW Sources . . . . . 0

**Service Population:**

Population . . . . . 822  
Secondary Population . . . . . 0

**Comments**

10,000 located off of mainline  
2,000 " " falls off

Signature: Steve Taper